

Fill in this information to identify the case:

United States Bankruptcy Court for the:

District of Massachusetts

Case number (if known): _____ Chapter 15

Check if this is an amended filing

Official Form 401

Chapter 15 Petition for Recognition of a Foreign Proceeding

12/15

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write debtor's name and case number (if known).

1. Debtor's name	Thomas Michael Mahon	
2. Debtor's unique identifier	For non-individual debtors: <input type="checkbox"/> Federal Employer Identification Number (EIN) _____ - _____ - _____ <input type="checkbox"/> Other _____ . Describe identifier _____.	
	For individual debtors: <input type="checkbox"/> Social Security number: xxx - xx- _____ - _____ <input type="checkbox"/> Individual Taxpayer Identification number (ITIN): 9 xx - xx - _____ - _____ <input checked="" type="checkbox"/> Other NH020725A . Describe identifier National Insurance Number _____.	
3. Name of foreign representative(s)	Tom Straw, MoorFields Advisory Ltd.; Stephen R. Penn, Absolute Recovery Ltd.	
4. Foreign proceeding in which appointment of the foreign representative(s) occurred	BKT5090336, In Bankruptcy under Insolvency Act 1986, England & Wales	
5. Nature of the foreign proceeding	Check one: <input checked="" type="checkbox"/> Foreign main proceeding <input type="checkbox"/> Foreign nonmain proceeding <input type="checkbox"/> Foreign main proceeding, or in the alternative foreign nonmain proceeding	
6. Evidence of the foreign proceeding	<input type="checkbox"/> A certified copy, translated into English, of the decision commencing the foreign proceeding and appointing the foreign representative is attached. <input type="checkbox"/> A certificate, translated into English, from the foreign court, affirming the existence of the foreign proceeding and of the appointment of the foreign representative, is attached. <input type="checkbox"/> Other evidence of the existence of the foreign proceeding and of the appointment of the foreign representative is described below, and relevant documentation, translated into English, is attached. _____ _____	
7. Is this the only foreign proceeding with respect to the debtor known to the foreign representative(s)?	<input type="checkbox"/> No. (Attach a statement identifying each country in which a foreign proceeding by, regarding, or against the debtor is pending.) <input checked="" type="checkbox"/> Yes	

Debtor	<u>Thomas Michael Mahon</u>	Name	Case number (<i>if known</i>)											
8. Others entitled to notice		Attach a list containing the names and addresses of:												
		<ul style="list-style-type: none"> (i) all persons or bodies authorized to administer foreign proceedings of the debtor, (ii) all parties to litigation pending in the United States in which the debtor is a party at the time of filing of this petition, and (iii) all entities against whom provisional relief is being sought under § 1519 of the Bankruptcy Code. 												
9. Addresses		Country where the debtor has the center of its main interests:	Debtor's registered office:											
		<u>England</u>	<table border="0"> <tr> <td>Number</td> <td>Street</td> </tr> <tr> <td colspan="2">P.O. Box</td> </tr> <tr> <td>City</td> <td>State/Province/Region</td> <td>ZIP/Postal Code</td> </tr> <tr> <td colspan="3">Country</td> </tr> </table>	Number	Street	P.O. Box		City	State/Province/Region	ZIP/Postal Code	Country			
Number	Street													
P.O. Box														
City	State/Province/Region	ZIP/Postal Code												
Country														
		Individual debtor's habitual residence:	Address of foreign representative(s):											
		<table border="0"> <tr> <td><u>62 Springfields</u></td> <td><u>See attached Lists - FRBP1007-I (a)(4)</u></td> </tr> <tr> <td>Number</td> <td>Street</td> </tr> <tr> <td colspan="2">P.O. Box</td> </tr> <tr> <td>City</td> <td>State/Province/Region</td> <td>ZIP/Postal Code</td> </tr> <tr> <td colspan="3">Country</td> </tr> </table>	<u>62 Springfields</u>	<u>See attached Lists - FRBP1007-I (a)(4)</u>	Number	Street	P.O. Box		City	State/Province/Region	ZIP/Postal Code	Country		
<u>62 Springfields</u>	<u>See attached Lists - FRBP1007-I (a)(4)</u>													
Number	Street													
P.O. Box														
City	State/Province/Region	ZIP/Postal Code												
Country														
10. Debtor's website (URL)		<u>N/A</u>												
11. Type of debtor		<p><i>Check one:</i></p> <p><input type="checkbox"/> Non-individual (<i>check one</i>):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Corporation. Attach a corporate ownership statement containing the information described in Fed. R. Bankr. P. 7007.1. <input type="checkbox"/> Partnership <input type="checkbox"/> Other. Specify: _____ <p><input checked="" type="checkbox"/> Individual</p>												

Debtor Thomas Michael Mahon _____ Case number (*if known*) _____

12. Why is venue proper in this district?

Check one:

- Debtor's principal place of business or principal assets in the United States are in this district.
 Debtor does not have a place of business or assets in the United States, but the following action or proceeding in a federal or state court is pending against the debtor in this district:
White Winston v. Mahon, #1:19-cv-12339; U.S.D.C., DMass.
 If neither box is checked, venue is consistent with the interests of justice and the convenience of the parties, having regard to the relief sought by the foreign representative, because:

13. Signature of foreign representative(s)

I request relief in accordance with chapter 15 of title 11, United States Code.

I am the foreign representative of a debtor in a foreign proceeding, the debtor is eligible for the relief sought in this petition, and I am authorized to file this petition.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct,

Signature of foreign representative

Tom Straw

Printed name

Executed on 01/23/2020
MM / DD / YYYY

Signature of foreign representative

Stephen R. Penn

Printed name

Executed on 01/23/2020
MM / DD / YYYY

14. Signature of attorney

Signature of Attorney for foreign representative

Date

01/23/2020

MM / DD / YYYY

Daniel M. Glosband, Jack Esher

Printed name

Firm name

c/o CBInsolvency, LLC, 34 Atlantic Avenue

Number Street

Swampscott

City

MA

01907

State

ZIP Code

(617) 669-1541

Contact phone

danielglosband@yahoo.com

Email address

195620 (Glosband); 544885 (Esher)

Bar number

MA

State

Debtor

Thomas Michael Mahon

Name

Case number (if known)

12. Why is venue proper in this district?

Check one:

- Debtor's principal place of business or principal assets in the United States are in this district.
- Debtor does not have a place of business or assets in the United States, but the following action or proceeding in a federal or state court is pending against the debtor in this district: White Winston v. Mahon, #1:19-cv-12339; U.S.D.C., DMass.
- If neither box is checked, venue is consistent with the interests of justice and the convenience of the parties, having regard to the relief sought by the foreign representative, because:

13. Signature of foreign representative(s)

I request relief in accordance with chapter 15 of title 11, United States Code.

I am the foreign representative of a debtor in a foreign proceeding, the debtor is eligible for the relief sought in this petition, and I am authorized to file this petition.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Signature of foreign representative

Tom Straw

Printed name

Executed on 01/23/2020MM / DD / YYYY

Signature of foreign representative

Stephen R. Penn

Printed name

Executed on 01/23/2020MM / DD / YYYY**14. Signature of attorney**

Signature of Attorney for foreign representative

Date 01/23/2020MM / DD / YYYY

Daniel M. Glosband, Jack Esher

Printed name

Firm name

c/o CBInsolvency, LLC, 34 Atlantic Avenue

Number Street

Swampscott

City

MA

01907

State

ZIP Code

(617) 669-1541

Contact phone

danielglosband@yahoo.com

Email address

195620 (Glosband); 544885 (Esher)

Bar number

MA

State

Debtor Thomas Michael Mahon _____ Case number (if known) _____
Name _____

12. Why is venue proper in this district?

Check one:

- Debtor's principal place of business or principal assets in the United States are in this district.
 Debtor does not have a place of business or assets in the United States, but the following action or proceeding in a federal or state court is pending against the debtor in this district:
White Winston v. Mahon, #1:19-cv-12339; U.S.D.C., DMass.
 If neither box is checked, venue is consistent with the interests of justice and the convenience of the parties, having regard to the relief sought by the foreign representative, because:

13. Signature of foreign representative(s)

I request relief in accordance with chapter 15 of title 11, United States Code.

I am the foreign representative of a debtor in a foreign proceeding, the debtor is eligible for the relief sought in this petition, and I am authorized to file this petition.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct,

X

Signature of foreign representative

Tom Straw

Printed name

Executed on 01/23/2020
MM / DD / YYYY

X

Signature of foreign representative

Stephen R. Penn

Printed name

Executed on 01/23/2020
MM / DD / YYYY

14. Signature of attorney

X Daniel M Glosband

Signature of Attorney for foreign representative

Date

01/23/2020

MM / DD / YYYY

Daniel M. Glosband, Jack Esher

Printed name

Firm name

c/o CBIInsolvency, LLC, 34 Atlantic Avenue

Number Street

Swampscott

City

MA

01907

State

ZIP Code

(617) 669-1541

Contact phone

danielglosband@yahoo.com

Email address

195620 (Glosband); 544885 (Esher)

Bar number

MA

State